



**Houldsworth Valley Primary Academy**

# **INTIMATE CARE POLICY**

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**Signed:**

**Chair of Governors**

**Signed:**

**Headteacher**



# **INTIMATE CARE POLICY**

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## **1. INTRODUCTION**

Staff who work with young children or young people will realise that the issue of intimate care is a difficult one and will require them to be respectful of children's needs.

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with intimate personal areas or exposure to intimate personal areas. An example includes care associated with continence as well as more ordinary tasks such as help with washing. Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them.

Staff that provide intimate care to children have a high awareness of child protection issues. Staff and their behaviour is open to scrutiny. Staff at Houldsworth Valley Primary Academy work in partnership with parents/carers to provide continuity of care to children/young people wherever possible. Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

Houldsworth Valley Primary Academy is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. Houldsworth Valley Primary Academy recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

See Administration of Medicines & First Aid Policy.

## **2. OUR APPROACH TO BEST PRACTICE**

All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance. Staff who provide intimate care are trained to do so (including Child Protection, Physical Intervention and Health and Safety training in moving and handling when appropriate) and are fully aware of best practice. Equipment will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapist as required. This will be followed by specialist led training in how to use the equipment safely. Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.

Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex and relationship education to their children/young people as an additional safeguard to both staff and children/young people involved. There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

As a basic principle children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves.

Individual intimate Health Care Plans will be drawn up for particular children as appropriate, to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the staff and health.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many staff might need to be present when a child needs help with intimate care. Where possible one child will be cared for by two adults, however, with some 1:1 children they will be cared for by one adult as agreed and outlined with parents. All staff will be DBS checked.

Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be named staff members known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different staff.

Parents/staff will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. (see appendix 1) The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation. Each child/young person will have an assigned member of staff to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

### **3. THE PROTECTION OF CHILDREN**

Updated training on Child Protection Procedures are delivered annually, unless changes in legislation or current issues determine this to be delivered sooner. Every briefing meeting, staff are updated with regards to individual children's medical needs. All Child Protection Procedures are adhered to at all times, by all members of staff. Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. he/she will immediately report concerns to the designated child protection officer (Deputy Headteacher). A clear record of the concern will be completed and where appropriate referred to social services. Parents will be informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm - see Houldsworth Valley Primary Academy's Child Protection Procedures/Policy.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed - see Child Protection Procedures/Policy.

### **4. SPECIFIC AREAS OF INTIMATE CARE**

#### **4.1 Children Wearing Nappies**

If a child is admitted into Houldsworth Valley Primary Academy and still wears nappies, parents will be provided with information from this policy and our practices in school. Parents will receive a care plan outlining who will be responsible, within the school, for changing the child and where and when

this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task from the outset. (see appendix 1)

#### **4.2 Equipment Provision**

If a child is admitted to Houldsworth Valley Primary Academy still wearing nappies it will be the parents responsibility to provide nappies, disposal bags, wipes and where necessary a changing mat. Spare clothes will also be required. The school will make the parents aware of this responsibility prior to the child joining the school. We as a school will be responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

#### **4.3 Health and Safety**

##### **See Appendix 2 - Checklist for Changing**

Staff should always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag will then be placed in a bin (complete with liner) which is specifically designated for the disposal of such waste. The bin will be emptied on a daily basis and it will be collected as part of the usual refuse collection service as this waste is not classified as clinical waste. Staff will be aware of the school's Health and Safety policy.

#### **4.4 Changing Facilities**

Any child who has long-term incontinence will require specially adapted facilities. At Houldsworth Valley Primary Academy we have one toilet specifically for children who need a larger space to toilet in. When children need to be changed in school, the dignity, safety and welfare of the child is of paramount concern. An area, which can be made private by the use of a screen, is acceptable. Consideration will be given to the sighting of this area from a health and safety aspect. The area should not be situated in a thoroughfare.

#### **4.5 Special Needs**

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and care plans for each child. As with all arrangements for intimate care needs, agreements between the child, those with parental responsibility and our school will be easily understood and recorded. Regardless of age and ability, the views and/or emotional responses of children with special needs will be actively sought (with advocacy arrangements made for those who can't). These arrangements will be regularly reviewed.

#### **4.6 Physical Contact**

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact. The expectation is that staff will work in 'limited touch' cultures and that when physical contact is made with pupils this will be in response to the pupil's needs at the time,

will be of limited duration and will be appropriate given their age, stage of development and background.

Staff will be aware that even well intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny. Children with special needs may require more physical contact to assist their everyday learning. The general culture of 'limited touch' will be adapted where appropriate to the individual requirements of each child. The arrangements must be understood and agreed by all concerned, justified in terms of the child's needs, consistently applied and open to scrutiny. Wherever possible, consultation with colleagues should take place where any deviation from the arrangements is anticipated. Any deviation and the justification for it should be documented and reported. Extra caution may be required where a child has suffered previous abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to staff vulnerable to allegations of abuse. Additionally, many such children are extremely needy and seek out inappropriate physical contact. In such circumstances staff should deter the child without causing them a negative experience. Ensuring that a witness is present will help to protect staff from such allegations.

#### **4.7 Restraint**

There may be occasions where it is necessary for staff to restrain children physically to prevent them from inflicting damage on either themselves, others or property. In such cases only the minimum force necessary should be used for the minimum length of time required for the child to regain self-control. In all cases of restraint the incident must be documented and reported. Staff will be fully aware of our schools' Physical Intervention/Positive Handling Policy. Under no circumstances would it be permissible to use physical force as a form of punishment, to modify behaviour, or to make a pupil comply with an instruction. Physical force of this nature can, and is likely to, constitute a criminal offence.

#### **4.8 Physical Education and Other Skills Coaching**

Staff will come into physical contact with pupils from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment. Staff should be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation. Where it is anticipated that a pupil might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable pupil in the demonstration.

#### **4.9 Changing Clothes**

Children are entitled to respect and privacy when changing clothes. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying or teasing does not occur. Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct, e.g. adults must not change in the same place as children.

#### **4.10 Out of School Trips/Clubs**

Employees should take particular care when supervising pupils in the less formal atmosphere of a residential setting or after-school activity. Although more informal relationships in such circumstances tend to be usual, the standard of behaviour expected of staff will be no different from the behaviour expected within school. Staff involved in such activities will be familiar with our schools 'out of school trips' policy and all LEA Guidance regarding out of school activities. To ensure pupils' safety, increased vigilance may be required when monitoring their behaviour on Residential etc. It is important to exercise caution so that a pupil is not compromised and the member of staff does not attract allegations of overly intrusive or abusive behaviour. Meetings with pupils away from the school premises where a chaperone will not be present, are not permitted unless specific approval is obtained from the Headteacher. Staff should not place themselves in a position where they are in a vehicle, house or other venue alone with a child. If staff come into contact with pupils whilst off duty, they must behave as though in their professional role and not give conflicting messages regarding their own conduct.

#### **4.11 Photography, Video and Similar Creative Arts**

Staff should be aware of the potential for such mediums of teaching to be used for the wrong purposes. Additionally, children who have been previously abused in this way may feel threatened by the legitimate use of photography, filming etc. The potential for founded and unfounded allegations of abuse requires that careful consideration be given to our school of these activities. Our school has clear policies and protocols for the taking and use of images and of photographic equipment (Mobile phone and digital photography policy). These should require the justification and purpose of the activity; its content; avoidance of one to one sessions; appropriate privacy when the changing of clothes is required; and, arrangements for access to the material and its storage. Consent to participating in these activities should be sought from the child and those with parental responsibility at the beginning of courses, but staff should remain sensitive to those children who appear particularly uncomfortable with the activity.

**APPENDIX 1**



**Houldsworth Valley Primary Academy**

**HOME/SCHOOL AGREEMENT FOR CHANGING/TOILET TRAINING**

I/We the parent(s)/carer(s) of .....

agree that:

My child will arrive in a clean nappy or I will change it on arrival.

I will provide all nappies and wipes to be used.

I will report any changes in my child's routine or skin care.

I will work with staff to help my child become toilet trained.

People responsible for changing my child will be:

My child will be changed in (room):

Other information (e.g. use of symbols, information specific to the child).

Signed: .....

Date: .....



## APPENDIX 2

### CHECKLIST FOR STAFF WHEN CHANGING:

#### PROCEDURES

- Take the child discreetly to the toilet area.
- Always inform another member of staff that you are changing a child, who will then ensure that they are nearby if possible.
- Always wear gloves for any bodily fluids or faeces.
- Child removes nappy and/or soiled clothing and place in a plastic bag.
- Encourage the child to clean their own bottom with the supplied appropriate wipes or cloth. Support will be provided if necessary.
- Remove the gloves now, before you touch a clean nappy or touch the child's clothes.
- Remove gloves by peeling back from your wrists. Do not let your skin touch the outer contaminated surface of the glove. Put the gloves in the bag, which should be double bagged before being placed in an appropriate bin, e.g. a nappy bin with a secure lid or a clinical waste bin.
- Encourage the child to put the clean nappy or underwear on. Support will be provided if necessary. Gloves will need to be worn.
- Encourage the child to dress themselves. Support will be provided if necessary.
- Get the child to wash their hands.
- Complete a record of the time of change and those present.
- Staff should report any marks or injuries that they are concerned about to the Senior Designated Person or the Alternate.

If a child needs more support to be changed and needs to be placed on to a changing mat:

- Take the child discreetly to the disabled toilet area.
- Always inform another member of staff that you are changing a child.
- Always wear gloves for any bodily fluids or faeces.
- Ask child to lay on the change mat.
- Child to remove nappy and any soiled clothes and place in a plastic bag.
- Child cleans their own bottom with the supplied and appropriate wipes or cloth.
- Remove the gloves now, before you touch a clean nappy or touch the child's clothes.
- Remove gloves by peeling back from your wrists. Do not let your skin touch the outer contaminated surface of the glove. Put the gloves in a bag which should be double bagged before being placed in an appropriate bin.
- Encourage the child to put on the clean nappy/underwear or put the nappy on for the child.
- Encourage the child to dress themselves, providing support where necessary. Gloves will be needed.
- Get the child to wash their hands and wash your own hands.
- Complete a record of the time of change and those present.
- Return child to class.
- Clean the change mat, paying particular attention to any folds in the mat. At the completion of each nappy change, ensure any cleansing material is also double bagged.
- Wash your hands.
- Staff should report any marks or injuries that they are concerned about to the Senior Designated Person or the Alternate.